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AUG 03 2001

TECH CENTER 1-800-2900

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 55)**Complete if Known**

Application Number	09/444,459
Filing Date	11/22/99
First Named Inventor	Cameron
Examiner Name	L. Leary
Group Art Unit	1623
Attorney Docket No.	A31964-072874.0113

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **02-4377**
Deposit Account Name **Baker Botts LLP**

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ **Payment Enclosed:**

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
710	355	Utility filing fee	
320	160	Design filing fee	
490	245	Plant filing fee	
710	355	Reissue filing fee	
150	75	Provisional filing fee	

SUBTOTAL (1) (\$ 0)**2. EXTRA CLAIM FEES**

Total Claims - 20 ** = x =
Independent Claims - 3 ** = x =
Multiple Dependent =

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
18	9	Claims in excess of 20
80	40	Independent claims in excess of 3
270	135	Multiple dependent claim, if not paid
80	40	** Reissue independent claims over original patent
18	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	For filing a request for <i>ex parte</i> reexamination	
920*	920*	Requesting publication of SIR prior to Examiner action	
1,840*	1,840*	Requesting publication of SIR after Examiner action	
110	55	Extension for reply within first month	55
390	195	Extension for reply within second month	
890	445	Extension for reply within third month	
1,390	695	Extension for reply within fourth month	
1,890	945	Extension for reply within fifth month	
310	155	Notice of Appeal	
310	155	Filing a brief in support of an appeal	
270	135	Request for oral hearing	
1,510	1,510	Petition to institute a public use proceeding	
110	55	Petition to revive - unavoidable	
1,240	620	Petition to revive - unintentional	
1,240	620	Utility issue fee (or reissue)	
440	220	Design issue fee	
600	300	Plant issue fee	
130	130	Petitions to the Commissioner	
50	50	Processing fee under 37 CFR 1.17(q)	
180	180	Submission of Information Disclosure Stmt	
40	40	Recording each patent assignment per property (times number of properties)	
710	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
710	355	For each additional invention to be examined (37 CFR § 1.129(b))	
710	355	Request for Continued Examination (RCE)	
900	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid **SUBTOTAL (3) (\$ 55)****SUBMITTED BY**

Name (Print/Type)	Michelle LeCointe	Registration No. (Attorney/Agent)	46,861	Telephone	212.408.2631
Signature	<i>Michelle LeCointe</i>	Date	07/30/01		

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 180

Complete if Known

Application Number 09/444,459
Filing Date 11/22/99
First Named Inventor Cameron
Examiner Name L. Leary
Group Art Unit 1623
Attorney Docket No. A31964-072874.0113

AUG 03 2001

TECH CENTER 1600 2900

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 02-4377

Deposit Account Name Baker Botts LLP

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
710	355	Utility filing fee	
320	160	Design filing fee	
490	245	Plant filing fee	
710	355	Reissue filing fee	
150	75	Provisional filing fee	

SUBTOTAL (1) (\$ 0

2. EXTRA CLAIM FEES

Total Claims - 20 ** = 0 x = 0
Independent Claims - 3 ** = 0 x = 0
Multiple Dependent Claims =

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
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80	40	** Reissue independent claims over original patent
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SUBTOTAL (2) (\$ 0

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
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710	355	Request for Continued Examination (RCE)	
900	900	Request for expedited examination of a design application	

Other fee (specify) _____

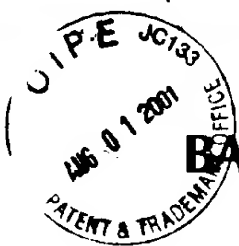
*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 180

SUBMITTED BY

Name (Print/Type)	Michelle LeCointe	Registration No. (Attorney/Agent)	46,861	Complete (if applicable)	Telephone	212.408.2631
Signature		Date	07/30/01			

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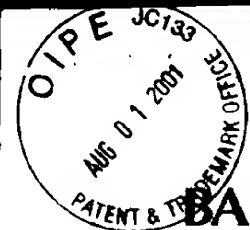
TECH CENTER 1600 2300

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/444,459
	Filing Date	11/22/99
	First Named Inventor	Cameron
	Group Art Unit	1623
	Examiner Name	L. Leary
Total Number of Pages in This Submission	Attorney Docket Number	A31964-072874.0113

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks <input type="checkbox"/>	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	BakerBotts LLP 30 Rockefeller Plaza New York, NY 10112
Signature	 Att Name: Michelle LeCointe PTO Reg: 46,861
Date	07/30/01

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 07/30/01	
Typed or printed name	Michelle LeCointe
Signature	
Date	07/30/01

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AUG 03 2001

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/444,459
	Filing Date	11/22/99
	First Named Inventor	Cameron
	Group Art Unit	1623
	Examiner Name	L. Leary
Total Number of Pages in This Submission	Attorney Docket Number	A31964-072874.0113

ENCLOSURES (check all that apply)		
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks <input type="checkbox"/>	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	BakerBotts LLP 30 Rockefeller Plaza New York, NY 10112
Signature	 Att Name: Michelle LeCointe PTO Reg: 46,861
Date	07/30/01

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 07/30/01	
Typed or printed name	Michelle LeCointe
Signature	Date: 07/30/01